JUROR QUALIFICATION FORM

	Juror Badge	Number	
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Dear Prospective Juror:

Please answer each of the following questions completely. The contact information you provide will be used only by court employees and shall not be made available to the attorneys or parties in the cases that you may be selected to hear as juror.

Estos formularios están disponibles en español en http://jury.nmcourts.gov. Si necesita más ayuda en español, llame al número telefónico indicado en la primera página del citatorio para prestar servicio como jurado.

	s it appears on the summons:						
Legal na	ame:						
Mailing	Address:						
Home A	Address (if different): State:						
City:	State:	Zip:					
	umbers:						
Home: _	Business:	Ext:					
Cell:	E-mail:						
1.	Do you live more than forty (40) roundtri			No N			
2.	If yes, what is your roundtrip mileage? Would you like to be compensated for mileage? Yes \[\] No \[\] Are you employed by the public schools, local government, or the State of New Mexico? (Note: these public employees cannot be compensated by the court for their jury service. Yes \[\] No \[\]						
2							
3.	Of which New Mexico County are you a range Are you a United States Citizen? Yes	N D IC C ::	1:				
4.	Will are and an Internation Ver	No In no, country of citize	nsnip:	_			
5.	Will you need an Interpreter? Yes No						
_	If yes, which language?						
6.	Have you ever been convicted of a felony						
	a. If yes, please explain:b. If yes, have you completed all c	onditions of parole or probation	on?				
	Yes□ No□.						
		completion issued by the Dep					
		pardon from the Governor of	New Mexico, or another stat	e.			
SELEC	T ONE:						
	I am available to serve for the dates listed	on my summons (skip to sign	ature, sign and return form).				
	I am requesting a postponement for the reasons noted below until the following date: (jury service may be postponed for up to six (6) months).						
	I am requesting to be excused or exempte	d for the reasons noted above.	I am submitting the required	documents.			
DEOLIE	COT FOR POOTPONEMENT EXCUSAL	OD EVENDEION IC	: : 1 11 16 1				
	EST FOR POSTPONEMENT, EXCUSAL, O		service is scheduled for a da	te that conflicts with your schedule, please			
	a postponement for a more convenient time.						
	re NO AUTOMATIC EXEMPTIONS. All ϵ						
ALL sit	tuations will be considered on a case by ca		tailed explanation for cases	of:			
	Prior jury service (provide appropriate da						
	Medical (must submit a current letter on l						
	Financial hardship (not being compensate	d by your employer is not gro	ınds for excusal)				
	Age: (persons 75 and c	older may go online to jury.nn	ncourts.gov or contact the cou	urt for an affidavit form requesting an			
	exemption)	, ,					
	Not a resident of the State of New Mexico registration card)	o or County (please	submit proof of residency, su	ach as a current driver's license or a voter			
	Caregiver: (mu	ist submit a current letter on le	tterhead from healthcare pro-	vider)			
\vdash	Nursing mother (a current letter on letterh	ead from healthcare provider	required if requesting second	nostnonement)			
	Students and Teachers (request to be post	noned until school breaks - nl	ease provide below the dates	when your school break begins and ends):			
Ш	Students and Teachers (request to be post		cuse provide below the dutes	when your school orean begins and chas).			
Othe	er:						
PLEAS	E NOTE: Unless you receive a letter from	the court stating you are excus	ed from attending jury service	e, you MUST appear on the date required			
	ourt. Not showing up for jury duty when sur						
	nonths in jail, or both. Section 31-19-1 NMS						
(0)		, ,		J F F			
Lswear	or affirm that the information I have provide	ed is true and correct to the be	st of my knowledge. I am aw	are that failure to submit required			
	ntation may result in the denial of my reque		or my knowledge. I din dw	are that failure to suchint required			
docume	mation may result in the demai of my reque						
SIGNA	TURE OF PROSPECTIVE JUROR		DATE				
			2.1.2				
SIGNAT	TURE OF THE PERSON PREPARING TH	IIS	DATE				
	IF DIFFERENT FROM PROSPECTIVE II		DATE				

JUROR QUESTIONNAIRE Juror Badge Number__ Please answer all questions, 1-20, and SIGN. The Juror Questionnaire will be provided to the attorneys, parties, and judges in all cases you may be selected to hear as a juror. The answers you provide will aid in the process of selecting a jury. If you do not understand a question, please place a question mark (?) next to the question. If you do not have enough room to answer the question, please use the space provided after question 20 or on separate sheet of paper. If there is a question you would rather discuss with the judge and attorneys in private, please indicate with an asterisk (*). Thank you for your cooperation. **2.** Gender: **1.** Legal name and former names: _____ 3. Birth Year: _____ 4. What is your race or ethnic background: _____ 5. In which Neighborhood and/or Area do you live: Where else have you lived (city, state, country): 6. What is your marital status: Single Married Domestic Partner Separated Divorced Widowed 7. If you are married or in a domestic partnership, please provide spouse's/partner's full name and occupation: 8. Do you have any children or step children: Yes No How many? ___ ages _____occupations ____ 9. Name of current or most recent employer and place of work: _____Dates of employment: _____ Occupation/Job title and duties: 10. How many years of schooling have you completed: Highest-level completed/degree Major areas of study____ 11. Do you belong to or participate in any religious, civic, social, union, professional, fraternal, or recreational organizations: Please list all: **12.** Current political party affiliation: 13. Have you or any member of your immediate family been the victim of a crime? Yes No. If yes, who was the victim? ______What crime? _______When? ______Was an arrest made? \[\textbf{Yes} \] **No** 14. Have you ever served as a juror: Yes No (If Yes please Check) Grand Jury Civil ☐ Criminal 15. Have you or anyone close to you ever sued anyone, or been sued: Yes No If **yes**, please explain: 16. Have you or an immediate family member ever been an agent, employee, or representative of an insurance company? \(\subseteq \text{Yes} \) 17. Have you or an immediate family member been a defendant in a criminal case? Yes No If **yes** please explain: _____ 18. Have you, or any family member ever been employed by a Court; law enforcement agency; a jail or prison; or any attorney's office? Yes No If yes name of employer: **19.** Do you have a physical or mental disability of which we need to be aware? \square Yes \square No Are you presently taking any medication which may affect your ability to serve as a juror? Yes No If yes, are there any special accommodations, services, or assistance we can provide during your jury service? 20. Is there any reason you could not serve as a juror? Yes No. (If you are requesting an excusal or postponement for this reason, you must complete and submit the Request for Postponement, Excusal, or Exemption Form) If yes, please explain: ___ Use this space for any additional comments: I SWEAR OR AFFIRM THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF

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